

# AUTO CR - LOG SUMMARY #1050859

TYPE: INFO

## Incident Finding / Overall Case Finding

Description of Incident	Finding	Entered By	Entered Date
It is reported that while the involved officers were in pursuit of a UUW Offender, the involved officer discharged his weapon at a dog who attempted to attack him, but missed and the fired round entered the ground.	(None Entered)		

## Reporting Party Information

	Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
CPD Employee	Reporting Party Third Party	COZZO, SAM P			010 /	LIEUTENANT OF POLICE	M	WHI		

## Incident Information

Incident From Date/Time	Address of Incident	Beat	Dist. Of Occurrence	Location Code	Location Description
22-DEC-2011 11:15 - 22-DEC-2011 11:15		1021	010	304 - STREET	

## Accused Members

Role	Name	Star No.	Emp No.	UOA / UOD	Position	Status	Initial / Intake Allegation
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## Other Involved Parties

	Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
CPD Employee	Involved Member	MATA, RICARDO	1903		010 /	POLICE OFFICER	M	S		
NON-CPD	Victim/Subject						M	BLK		
NON-CPD	Victim/Subject						M	BLK		

## Involved Party Associations

Role	Rep. Party Name	Related Person	Relationship
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## Incident Details

CR Required?		Manner Incident Received?	PAX
Confidential?		Biased Language?	N
Extraordinary Occurrence?	N	Bias Based Profiling?	N
Police Shooting (U)?	N	Alcohol Related?	N
Non Disciplinary Intervention:	N	Pursuit Related?	N
Initial Assignment:	IPRA	Violence in Workplace?	N
Notify IAD Immediately?	N	Domestic Violence?	N
EEO Complaint No.:			
Civil Suit No.:		Civil Suit Settled Date:	
Notify Chief Administrator?	N	Notify Chief?	
Notify Coordinator?		Notification Does Not Apply?	Y
Notification Other?	N		
Notification Comments:			

## Incident Category List

Incident Category	Primary?	Initial?
20B - GROUP 20 - NOTIFICATIONS SHOTS FIRED - DESTRUCTION OF ANIMAL	Y	Y



## Investigator History

Investigator	Type	Assigned Team	Assigned Date	Scheduled End Date	Investigation End Date	No. of Days
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## Extension History

Name	Previous Scheduled End Date	Extended Scheduled End Date	Date Certified Letter Sent	Reason Selected	Explanation	Extension Report Date	Approved By	Approved Date	Approval Comments
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## Current Allegations

Accused Name	Seq. No.	Allegation	Category	Subcategory	Finding
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## Situations (Allegation Details)

Accused Name	Alleg. No.	Situation	Victim/Offender Armed?	Weapon Types	Weapon Other	Weapon Recovered?	Deceased?
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## Status History

Resulting Status	Status Date/Time	Created By	Position	UOA / UOD	Comments
ADMINISTRATIVELY CLOSED	28-FEB-2012 05:33	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
CLOSED AT C.O.P.A.	28-FEB-2012 05:33	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
PENDING ASSIGN TEAM	30-JAN-2012 01:12	ROBERTS, GEORGE	SUPERVISING INVESTIGATOR	113 /	
PENDING SUPERVISOR REVIEW	29-JAN-2012 12:08	TOUSANT, LISA	INTAKE AIDE	113 /	
PRELIMINARY	29-JAN-2012 12:08	TOUSANT, LISA	INTAKE AIDE	113 /	
PRELIMINARY	24-DEC-2011 09:35	TOUSANT, LISA	INTAKE AIDE	113 /	
PRELIMINARY	24-DEC-2011 09:02	TOUSANT, LISA	INTAKE AIDE	113 /	
PRELIMINARY	23-DEC-2011 01:02	GONZALEZ, JORGE	POLICE OFFICER	116 /	INITIATED BY LT COZZO Emp No. [REDACTED]

## Attachments

No.	Type	Related Person	No. of Pages	Narrative	Original in File	Entered By	Entered Date/Time	Status	Approve Content	Approve Inclusion
1	FACE SHEET					GONZALEZ, JORGE	23-DEC-2011 01:02			
	DOCUMENTS - INTAKE INCIDENT		2	MATA RICARDO 11563	N	TOUSANT, LISA	24-DEC-2011 09:40	APPROVED		
	DOCUMENTS - INTAKE INCIDENT		2	Officer MATA RICARDO 11563	N	TOUSANT, LISA	24-DEC-2011 10:15	DELETED		
	DOCUMENTS - INTAKE INCIDENT		5	[REDACTED]	N	TOUSANT, LISA	24-DEC-2011 10:14	APPROVED		
	DOCUMENTS - INTAKE INCIDENT		13	[REDACTED]	N	TOUSANT, LISA	29-JAN-2012 12:08	APPROVED		
	DOCUMENTS - INTAKE INCIDENT		5	[REDACTED]	N	TOUSANT, LISA	24-DEC-2011 09:37	APPROVED		
	DOCUMENTS - INTAKE INCIDENT		4	Case Report [REDACTED]	N	TOUSANT, LISA	24-DEC-2011 09:38	APPROVED		

## Review Incident

Review Type	Accused/Involved Member Name	Result Type	Reviewed By	Position	Unit	Review Date	Remarks
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## Review Accused

Review Type	Accused/Involved Member Name	Result Type	Reviewed By	Position	Unit	Review Date	Remarks
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Review Accused

Accused Finding History

Accused	Allegation	Reviewed By	Reviewed Date/Time	CCR?	Concur?	Finding	Finding Comments
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Accused Penalty History

Accused	Reviewed By	Reviewed Date/Time	CCR?	Concur?	Penalty	Penalty Comments
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Findings

Accused Name	Allegations	Category	Concur?	Findings	Comments
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# FACE SHEET (Notification Date: 23-DEC-2011) - LOG #1050859

TYPE: INFO

## Reporting Party Information

	Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
CPD Employee	Reporting Party Third Party	COZZO, SAM P			010 /	LIEUTENANT OF POLICE	M	WHI		

## Incident Information

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## Incident Details

CR Required?		Manner Incident Received?	PAX
Confidential?		Biased Language?	N
Extraordinary Occurrence?	N	Bias Based Profiling?	N
Police Shooting (U)?	N		
Motor Vehicle (V)?		Alcohol Related?	N
Non Disciplinary Intervention:	N	Pursuit Related?	N
Initial Assignment:	IPRA	Violence in Workplace?	N
Notify IAD Immediately?	N	Domestic Violence?	N
EEO Complaint No.:			
Civil Suit No.:		Notify Chief?	
Notify Chief Administrator?	N	Notification Does Not Apply?	Y
Notify Coordinator?			
Notification Other?	N		

## Initial Incident Category List

Initial Incident Category	Primary?
20B - GROUP 20 - NOTIFICATIONS SHOTS FIRED - DESTRUCTION OF ANIMAL	Y

## Assignment History

Assigned To	Assigned Team	Investigator	Assignment Date/Time	Assigned By	Reason
IPRA	CIVILIAN OFFICE OF POLICE ACCOUNTABILITY	-	23-DEC-2011 01:02	GONZALEZ, JORGE	

## Status History

Resulting Status	Status Date/Time	Created By	Position	UOA / UOD	Comments
ADMINISTRATIVELY CLOSED	28-FEB-2012 05:33	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
CLOSED AT C.O.P.A.	28-FEB-2012 05:33	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
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PRELIMINARY	24-DEC-2011 09:35	TOUSANT, LISA	INTAKE AIDE	113 /	
PRELIMINARY	24-DEC-2011 09:02	TOUSANT, LISA	INTAKE AIDE	113 /	
PRELIMINARY	23-DEC-2011 01:02	GONZALEZ, JORGE	POLICE OFFICER	116 /	INITIATED BY LT COZZO Emp No. [REDACTED]



## ARREST REPORT

3510 S. Michigan Avenue, Chicago, Illinois 60653

(For use by Chicago Police Department Personnel Only)

CPD-11.420C (REV. 6/30)

CB #:

IR #:

YD #:

RD #:

EVENT #:

## ARREST REPORTING

OFFENDER	Name:		Male		
	Res:		Black		
		Beat: 1021	5' 08"		
	None		220 lbs		
	DOB:		Brown Eyes		
	AGE: 43 years		Black Hair		
	POB: Illinois		Bald Hair Style		
	ARMED WITH Handgun		Dark Complexion		
INCIDENT	Arrest Date: 22 December 2011 22:50	TRR Completed? No	Total No Arrested: 2	Co-Arrests	Assoc Cases
	Location:	Beat: 1021	Dependent Children? No	DCFS Ward ? No	
	303 - Sidewalk				
	Holding Facility: District 010 Lockup				
	Resisted Arrest? No				
CHARGES	1	Offense As Cited 720 ILCS 5.0/24-1.1-A		Victim	
		UUW - WEAPON - FELON, POSSESS/USE FIREARM		State Of Illinois, P.O. Olivares #14358	
	2	Offense As Cited 430 ILCS 65.0/2-A-2		State Of Illinois, P.O. Olivares #14358	
		POSS AMMUNITION - W/O VALID FOID			
		Class A - Type M			
FELONY REVIEW	Felony Review : Approved	23 DEC 2011 19:37	Logan, G	State's Attorneys's Office	IR #
RECOVERED NARCOTICS	NO NARCOTICS RECOVERED				



## ARREST REPORTING

WARRANT

NO WARRANT IDENTIFIED

NON-OFFENDER(S)

## VICTIM AND COMPLAINANT

Name: STATE OF ILLINOIS, P.O. Olivares #14358

Injured? No Deceased? No

DOB:

Hospitalized? No

Age:

Treated and Released? No

Comments:

ARRESTEE  
VEHICLE

Vehicle: VEHICLE IMPOUNDED: Yes

2004 Automobile - Pontiac - Grand Am - Hardtop, 4-Door

VIN#:

Lic#:

IL

Color: Aluminum Or Silver (Top) / Aluminum Or Silver (Bottom)

Inv#:

Pound#:

Disposition: Streets And Sanitation #099411

PROPERTIES

## Confiscated Properties :

All confiscated properties are recorded in the e-Track System. This system can be queried by the inventory number to retrieve all official court documents related to evidence and/or recovered properties.

PROPERTIES INFORMATION FOR [REDACTED] NOT AVAILABLE IN THE AUTOMATED ARREST SYSTEM.

INCIDENT NARRATIVE

(The facts for probable cause to arrest AND to substantiate the charges include, but are not limited to, the following)

EVENT# [REDACTED] IN SUMMARY, THIS IS AN ON-VIEW ARREST BY 010 DISTRICT TACT (1063) TEAM. A/O'S CONDUCTED AN INVESTIGATION OF POSSIBLE ROBBERY SUSPECTS, ABOVE MATCHING DESCRIPTION (two male blacks in a silver grand am), A/O'S APPROACHED, AT WHICH TIME THE ABOVE and the co-arrestee LOOKED IN A/O'S DIRECTION AND FLED WB THROUGH GANGWAY OF [REDACTED]. A foot pursuit ensued and during the pursuit A/O MADILE OBSERVED THE ABOVE SUBJECT THROW (1) CHROME REVOLVER LOADED W/ (6) LIVE ROUNDS (COLT POLICE POSITIVE .38 SPECIAL 4" BARREL REVOLVER SER# [REDACTED]) TO THE GROUND IN THE REAR OF [REDACTED] (RECOVERED BY P.O. COX #19328 INV# [REDACTED]). SUBJECT CONTINUED TO FLEE AND AFTER A BRIEF FOOT PURSUIT WAS PLACED INTO CUSTODY AT [REDACTED] CHRISTIANA MIRANDIZED AND TRANSPORTED TO 010 FOR PROCESSING. THE ABOVE WAS RE-MIRANDIZED IN THE 10TH DISRICT PROCESSESING ROOM AT 0036HRS BY P.O. VEGA (WITNESSED BY OLIVARES), STATED IN ESSENCE AND NOT VERBATIM " I DON'T KNOW SHIT ABOUT ANY GUNS, YOU AINT GONNA FIND ANY PRINTS ON SHIT. I'M GONNA BEAT THIS CASE AT JURY LIKE THAT ARMED ROBBERY"

NAME CHECK CLEAR/NEGATIVE INVESTIGATIVE ALERTS. ABOVE ARRESTEE IS A CONVICTED FELON UNDER CASE # [REDACTED] AND A SELF- ADMITTED MEMBER OF THE [REDACTED]

Property inventory # [REDACTED] CHROME REVOLVER LOADED W/ (6) LIVE ROUNDS (COLT POLICE POSITIVE .38 SPECIAL 4" BARREL REVOLVER SER# [REDACTED])

SEE WC COMMENTS SECTION FOR ADDITIONAL COMMENTS



## ARREST REPORTING

COURT INFO	BOND INFO
Desired Court Date: 29 December 2011 Branch: 44-4 3150 W FLOURNOY - Room Court Sgt Handle? No Initial Court Date: 24 December 2011 Branch: 1 2600 S CALIFORNIA - Room111 Docket #:	BOND INFORMATION NOT AVAILABLE

REPORTING PERSONNEL
<b>ATTESTING OFFICER:</b> I hereby declare and affirm, under penalty of perjury, that the facts stated herein are accurate to the best of my knowledge, information and/or belief.
Attesting Officer: #14358 OLIVARES, L F [REDACTED] 23 DEC 2011 03 47
<b>ARRESTING OFFICER(S):</b>
1st Arresting Officer: #14358 OLIVARES, L F [REDACTED] Beat 1063A
2nd Arresting Officer: #19204 MC KENNA, C L [REDACTED] Beat 1063A
<b>APPROVING SUPERVISOR:</b>
Approval of Probable Cause : #179 COZZO, S P [REDACTED] 23 DEC 2011 03 56



## ARREST PROCESSING REPORT

Holding Facility: District 010 Lockup  
Received in Lockup: 23 December 2011 03 58  
Prints Taken: 23 December 2011 03 59  
Palprints Taken: Yes  
Photograph Taken: 23 December 2011 04 00  
Released from Lockup:

Time Last Fed: 23 December 2011 19 10  
Time Called: Phone#:  
Cell #: 6  
Transport Details : 1PO 1020 22-DEC-2011 23 16

## VISUAL CHECK OF ARRESTEE

## ARRESTEE QUESTIONNAIRE

Is there obvious pain or injury? No  
Is there obvious signs of infection? No  
Under the influence of alcohol/drugs? No  
Signs of alcohol/drug withdrawal? No  
Appears to be despondent? No  
Appears to be irrational? No  
Carrying medication? No

Presently taking medication? No  
(if female)are you pregnant?  
First time ever been arrested? No  
Attempted suicide/serious harm? No  
Serious medical or mental problems? No  
Are you receiving treatment? No

## RETURN TO HOLDING FACILITY COMMENTS:

## QUESTIONNAIRE REMARKS:

## LOCKUP KEEPER COMMENTS:

23 DEC 2011 11:33 4385 CAMACHO, Carmelo Arrestee Fed  
23 DEC 2011 13:58 12059 GALLOWAY, Allen J Cell 6  
23 DEC 2011 19:10 12059 GALLOWAY, Allen J Fed  
23 DEC 2011 19:11 12059 GALLOWAY, Allen J Fed

## EMERGENCY CONTACT

Name : REFUSED

Res:

Beat:

## INTERVIEW LOG

NO INTERVIEWS LOGGED

## VISITOR LOG

NO VISITORS LOGGED



## ARREST PROCESSING REPORT

MOVEMENT LOG

MOVEMENT LOG INFORMATION NOT AVAILABLE

WC COMMENTS

## Watch Commander Comments:

#179 Cozzo, Sam P ([REDACTED])

23 DEC 2011 04 02

Hold Requested by Area 4 Det Div W C Ed Wodnicki #1105 to review appropriate charges

REL w/o CHARGING

DOES NOT APPLY TO THIS ARREST

## ARRESTEE PROCESSING PERSONNEL:

PROCESSING PERSONNEL

			Beat
Searched By:	#15286	MULCHRONE, J C ([REDACTED])	
Lockup Keeper:	#4727	LIBERTY, K C ([REDACTED])	
Assisting Arresting Officer:	#11563	MATA, R ([REDACTED])	1063A
Assisting Arresting Officer:	#17571	MANDILE, A ([REDACTED])	1063B
Assisting Arresting Officer:	#17763	SERRATO JR, R ([REDACTED])	1063D
Assisting Arresting Officer:	#19122	KORWIN, W M ([REDACTED])	1063C
Assisting Arresting Officer:	#19328	COX, B M ([REDACTED])	1063E
Assisting Arresting Officer:	#6875	VEGA, G ([REDACTED])	1063D
Assisting Arresting Officer:	#8048	ELIZONDO, G ([REDACTED])	1063B
Assisting Arresting Officer:	#9721	DEEREN, K C ([REDACTED])	1063E
Fingerprinted By:	#4727	LIBERTY, K C ([REDACTED])	

## APPROVAL PERSONNEL:

			Beat
Final Approval of Charges :	#515	HLAVATY, D L ([REDACTED])	23 DEC 2011 19 49



# CHICAGO POLICE DEPARTMENT ORIGINAL CASE INCIDENT REPORT

3510 S. Michigan Avenue, Chicago, Illinois 60653  
(For use by Chicago Police Department Personnel Only)  
CPD-11 388(6/03)-C)

RD #: [REDACTED]

EVENT #: [REDACTED]

Case ID [REDACTED]

<b>INCIDENT</b>	<b>CLEARED/CLOSED (ARREST AND PROSECUTION)</b>		
	IUCR: 143A - Weapons Violation - Unlawful Poss Of Handgun		
	Occurrence Location: [REDACTED] 304 - Street	Beat: 1021	Unit Assigned: 1063E RO Arrival Date: 22 December 2011 21:50
	Occurrence Date: 22 December 2011 22:48		# Offenders: 2

<b>NON OFFENDER</b>	<b>VICTIM Individual</b>		<b>Police Officer</b>	
	Name: STATE OF IL, P.O. Olivares#14358		Demographics	
	Res: [REDACTED]	Beat: 1024	Age: [REDACTED]	Years [REDACTED]
	Beat: 5100			
Sobriety: Sober				

<b>SUSPECTS</b>	<b>Suspect # 1</b>		<b>In Custody</b>	
	Name: [REDACTED]		Demographics	
	Res: [REDACTED]	Beat: 1021	Male Black 5'08, 220 lbs Brown Eyes Black Hair Bald Hair Style Dark Complexion	DOB: [REDACTED] Age: 43 years Birth Place: IL Suspected of Using: Weapon Vehicle

<b>Descriptions</b>	
Clothing Description: Hat - Green, Light W/ Notre Dame Logo Skull Cap; Top - Black Jacket; Top - Green Shirt; Bottom - Black Jeans; Shoes - White Gym Shoes	

<b>SUSPECTS</b>	<b>Suspect # 2</b>		<b>In Custody</b>	
	Name: [REDACTED]		Demographics	
	Res: [REDACTED]	Beat: 1135	Male Black 5'07, 160 lbs Brown Eyes Black Hair Bald Hair Style Dark Complexion	DOB: [REDACTED] Age: 48 years Birth Place: IL Suspected of Using: Weapon Vehicle

<b>Descriptions</b>	
Clothing Description: Top - Blue, Dark Sweater; Bottom - Blue, Dark Work Pants Other; Shoes - White Gym Shoes	





RELATIONSHIP

## RELATIONSHIP

(Victim)  
STATE OF IL, P.O. Olivares#14358 is a No Relationship of (Offender) [REDACTED]

(Victim)  
STATE OF IL, P.O. Olivares#14358 is a No Relationship of (Offender) [REDACTED]

DOMESTIC INFO

VEHICLE

## Vehicle #1

Vehicle: 2004 Pontiac - Grand Am -  
Automobile

Damaged? No

Owner: [REDACTED]

Style: Sedan, 4-Door

Damaged Descr: Dent-Right Side, Possessor/User: [REDACTED]

Color-Top/Bottom: Aluminum Or  
Silver/Aluminum Or Silver

Theft From? No

Towed? No

VIN#: [REDACTED]

Burned? No

License Plate #: [REDACTED] - Illinois -  
Passenger Car

Destroyed? No

Expires: 01-February-2012

Recovered? No

Stolen? No



Firearm #1		Possessor/User:
Type: Revolver		Duty Related: No
Make: Colt --Us--	Model: Police Positive	Taken/Stolen? No
Serial #: [REDACTED]	Owner Known? Yes	
Caliber/Gauge: 38 Caliber	Owner: [REDACTED]	Displayed? Yes
Barrel Length: 4"		Used? No
Feature: Chrome/Nickel		Recovered? Yes
Registration Status: Clear		
		Inventory #: [REDACTED]
Location Found: [REDACTED] (Backyard)	# Live Rounds: 6	

Firearm #2		Possessor/User:
Type: Pistol		Duty Related: No
Make: Other-See Narrative	Model: Star-Firestar	Taken/Stolen? No
Serial #: [REDACTED]	Owner Known? Yes	
Caliber/Gauge: 40 Caliber	Owner: [REDACTED]	Displayed? Yes
Barrel Length: 3"		Used? No
Feature: Blue Steel		Recovered? Yes
Registration Status: Clear		
		Inventory #: [REDACTED]
Location Found: [REDACTED] (Lot)	# Live Rounds: 6	

Property #1		Possessor/User:
Quantity: 1		Used as Weapon? No
Type: Clothes/Furs		Taken/Stolen? No
Description: Green Skull Cap W/Notre Dame Logo	Owner: [REDACTED]	Recovered? Yes
		Damaged? No

Property #2		Possessor/User:
Quantity: 1		Used as Weapon? No
Type: Clothes/Furs		Taken/Stolen? No
Description: Red/Green Flanel Coat	Owner: [REDACTED]	Recovered? Yes
		Damaged? No

Property #3		Possessor/User:
Quantity: 1		Used as Weapon? No
Type: Clothes/Furs		Taken/Stolen? No
Description: Pair Of Black Gloves	Owner: [REDACTED]	Recovered? Yes
		Damaged? No



NARRATIVE

EVENT# [REDACTED] IN SUMMARY, BT 1060(LT. LEIBAS) RECEIVED A PHONE CALL IN THE 010 DISTRICT FROM A CITIZEN WHO WISHES TO REMAIN ANONYMOUS THAT 2 M/1'S IN A SILVER PONTIAC GRAND AM ARE COMMITTING AN ARMED ROBBERY AND WILL BE ARRIVING AT [REDACTED] SHORTLY THEREAFTER. IN RESPONSE TO SAID INFORMATION, 1063 TEAM FORMULATED A PLAN AND CONDUCTED A SURVEILLANCE, WHILE IN CONSTANT RADIO CONTACT, OF ABOVE LOCATION. AT APPROX 2247HRS. A SILVER PONTIAC GRAND AM (ABOVE VEHICLE) WAS OBSERVED BY (SERRATO/VEGA) TRAVELING N/B ON [REDACTED] ABOVE VEHICLE WAS THEN OBSERVED BY (MANDILE/KORWIN) TO BE OCCUPIED BY TWO MALE BLACKS AND PARK IN FRONT OF [REDACTED] AT WHICH POINT (MANDILE) RELATED PERTINENT INFO (DESCRIPTION/LOCATION) OF OFFENDERS TO WAITING E/O'S (DEEREN/COX/ELIZONDO/MATA/MCKENNA/SERRATO/VEGA/LEIBAS). AT WHICH POINT OFFENDER [REDACTED] EXITED THE FRONT PASSENGER AND OFFENDER [REDACTED] EXITED THE DRIVERS DOOR CARRYING A RED/GREEN FLANNEL ITEM. AS E/O'S APPROACHED, BOTH OFFENDERS LOOKED AT E/O'S AND FLED W/B ON FOOT THROUGH SOUTH GANGWAY OF [REDACTED]. E/O'S GAVE CHASE AND DURING FOOT PURSUIT (MANDILE) OBSERVED OFFENDER [REDACTED] THROW A CHROME REVOLVER TO THE GROUND WITH HIS RIGHT HAND IN BACKYARD OF [REDACTED] SAID WEAPON WAS IMMEDIATELY CONTROLLED AND EVENTUALLY RECOVERED AND PRESERVED FOR PRINTS BY P.O. COX FOUND TO BE (1) ONE CHROME COLT, POLICE POSITIVE .38 SPECIAL REVOLVER W/ 4? BARREL, CONTAINING (6) SIX LIVE ROUNDS, SER# [REDACTED] (INV# [REDACTED]). OFFENDER [REDACTED] THEN CONTINUED W/B THROUGH VACANT LOT, THEN S/B AND WAS IMMEDIATELY PLACED INTO CUSTODY AT [REDACTED] BY (MANDILE/OLIVARES). AS OFFENDER [REDACTED] WAS BEING PURSUED W/B, (OLIVARES) OBSERVED OFFENDER FALL IN VACANT LOT [REDACTED] AND A BLACK SEMI-AUTO HANDGUN FALL FROM OFFENDER'S [REDACTED] WAISTBAND. OFFENDER [REDACTED] REACHED FOR SAID WEAPON, LOOKED IN DIRECTION OF (OLIVARES) AND CONTINUED THROUGH VACANT LOT AND N/B ON CHRISTIANA. SAID WEAPON WAS THEN IMMEDIATELY CONTROLLED, EVENTUALLY RECOVERED AND PRESERVED FOR PRINTS BY (KORWIN), WHICH WAS FOUND TO BE (1) ONE STAR, FIRESTAR MODEL, BLUE STEEL SEMI-AUTO, .40CAL PISTOL W/ 3? BARREL, SER# [REDACTED] CONTAINING (6) SIX LIVE ROUNDS INCLUDING (1) ONE IN THE CHAMBER (INV# [REDACTED]). OFFENDER [REDACTED] THEN CONTINUED TO FLEE W/B THROUGH SOUTH GANGWAY OF [REDACTED]. AT WHICH POINT (MATA) OBSERVED A LARGE ROTWEILER AGGRESSIVELY APPROACHING, (MATA) DISCHARGED HIS WEAPON, MISSING ROTWEILER, WHICH THEN RETREATED AND (MATA) CONTINUED HIS PURSUIT OF OFFENDER. OFFENDER [REDACTED] THEN EVENTUALLY DOUBLED BACK ONTO CHRISTIANA AND WAS PLACED INTO CUSTODY AT [REDACTED] BY (DEEREN/VEGA). BOTH OFFENDERS WERE MIRANDIZED AND TRANSPORTED TO 010 FOR PROCESSING.-(1) ONE SPENT .45 CAL CASING WAS RECOVERED FROM SOUTH GANGWAY OF [REDACTED] NV# [REDACTED]. NO STRUCTURAL OR PROPERTY DAMAGE OCCURRED AND ROUND WAS IMBEDDED INTO THE MUDDY GROUND AND NOT RECOVERED. OWNER OF PROPERTY (HEARD, MAXINE F/1/DOB: [REDACTED]) WAS ON SCENE AND STATED THAT DOG WAS NOT STRUCK.-(1) ONE FLANNEL COAT AND PAIR OF BLACK GLOVES RECOVERED FROM BEHIND GARBAGE CAN IN REAR OF [REDACTED] RECOVERED BY (VEGA) (INV# [REDACTED]).-(1) ONE GREEN SKULL CAP WITH NOTRE DAME LOGO RECOVERED AT [REDACTED] IN VACANT LOT BY (COX) (INV# [REDACTED]). BOTH GUNS CLEAR/NOT REGISTERED VIA GUN DESK, MACK #14021 @0051HRS- BOTH OFFENDERS WERE CLEAR VIA LEADS/NO INVESTIGATIVE ALERTS.-BT 6743C RESPONDED TO SCENE AND SAT WITH OFFENDER'S VEHICLE UNTIL RELOCATED TO 010TH DISTRICT. [REDACTED] WAS RE-MIRANDIZED @0036HRS BY P.O. VEGA IN PRESENCE OF P.O. OLIVARES AT WHICH TIME OFFENDER STATED, BUT NOT IN VERBATIM ?I DON'T KNOW SHIT ABOUT ANY GUNS. YOU AIN'T GONNA FIND MY PRINTS ON SHIT. I'M GONNA BEAT THIS CASE AT JURY LIKE THAT ARMED ROBBERY.?- [REDACTED] WAS RE-MIRANDIZED @0036HRS BY P.O. VEGA IN PRESENCE OF P.O. OLIVARES AT WHICH TIME OFFENDER STATED, BUT NOT IN VERBATIM ?I BOUGHT THE THIRTY EIGHT, THE SILVER ONE, AT 16TH AND PULASKI. I GAVE IT TO MY BOY TONIGHT FOR PROTECTION.?- [REDACTED] RECEIVED A SMALL ABRASION TO HIS LEFT EYE FROM FALLING IN VACANT LOT. [REDACTED] REFUSED MEDICAL ATTENTION WHILE IN PROCESSING ROOM.

FIRST ARRESTING OFFICER - STAR#: 14358 NAME: LAWRENCE OLIVARES BEAT: 1063A  
 SECOND ARRESTING OFFICER - STAR#: 17571 NAME: ANGELO MANDILE BEAT: 1063B  
 ASSISTING OFFICER - STAR#: 19122 NAME: WILLIAM KORWIN BEAT: 1063C  
 ASSISTING OFFICER - STAR#: 9721 NAME: KEVIN DEEREN BEAT: 1063E  
 ASSISTING OFFICER - STAR#: 19328 NAME: BRYAN COX BEAT: 1063E  
 ASSISTING OFFICER - STAR#: 17763 NAME: REYNALDO SERRATO JR BEAT: 1063D  
 ASSISTING OFFICER - STAR#: 19204 NAME: CATHLENE MC KENNA BEAT: 1063A  
 ASSISTING OFFICER - STAR#: 6875 NAME: GERARDO VEGA BEAT: 1063D  
 ASSISTING OFFICER - STAR#: 8048 NAME: GRISELDA ELIZONDO BEAT: 1063B  
 SUPERVISOR ON SCENE - STAR#: 310 NAME: PHILLIP LEIBAS SR BEAT: 1060  
 ASSISTING OFFICER - STAR#: 11563 NAME: RICARDO MATA BEAT: 1063A  
 ASSISTING OFFICER - STAR#: 8990 NAME: JIMMY WOODS BEAT: 6743C

PERSONNEL

	Star No	Emp No	Name	User	Date	Unit	Beat
Approving Supervisor	1308	[REDACTED]	HERNANDEZ, Ignacio	[REDACTED]	23 Dec 2011 03:23	010	
Reporting Officer	9721	[REDACTED]	DEEREN, Kevin, C	[REDACTED]	23 Dec 2011 03:17	010	1063E





## TACTICAL RESPONSE REPORT/Chicago Police Department

MEMBER INVOLVED	1 DATE OF INCIDENT <b>22-DEC-2011</b>		TIME <b>22:50:00</b>		2 ADDRESS OF OCCURRENCE [REDACTED]				3 LOCATION CODE <b>291</b>		4 BEAT/OCCUR <b>1021</b>								
	5 POSITION <b>9161</b>		6 LAST NAME <b>MATA</b>		7 FIRST NAME <b>RICARDO</b>		8 STAR NO <b>11563</b>		9 SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F		10 RACE CODE <b>S</b>		11 AGE [REDACTED]		12 HT <b>511</b>		13 WT <b>170</b>		
	14 DATE OF APPT <b>05-JUN-1995</b>		15 EMPLOYEE NO [REDACTED]		16 UNIT & BEAT OF ASSIGNMENT <b>010 1063A</b>		17 DUTY STATUS <input checked="" type="checkbox"/> 01 On <input type="checkbox"/> 02 Off		18 MEMBER INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		19 MEMBER IN UNIFORM? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No								
	20 LAST NAME		21 FIRST NAME		22 M I		23 SEX <input type="checkbox"/> 01 M <input type="checkbox"/> 02 F		24 RACE		25 D O B		26 HT		27 WT				
SUBJECT INFORMATION	28 ADDRESS				29 TELEPHONE NO		30 WAS SUBJECT ARMED? <input type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No				31 SUBJECT INJURED? <input type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No		32 SUBJECT ALLEGED INJURY? <input type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No						
	33 WHERE WAS MEDICAL TREATMENT OBTAINED?				34 BY WHOM?		35 CONDITION <input type="checkbox"/> 01 Apparently Normal <input type="checkbox"/> 02 Under Influence <input type="checkbox"/> 03 Hospitalized <input type="checkbox"/> 04 Not Hospitalized <input type="checkbox"/> 05 Refused Medical Aid												
	36 CHARGES PLACED <input checked="" type="checkbox"/> DNA								37 CB NO		IR NO		<input checked="" type="checkbox"/> DNA						
REASON FOR USE OF FORCE (Check all that apply)	38 <input checked="" type="checkbox"/> DNA		SUBJECT'S ACTIONS		PASSIVE RESISTER		ACTIVE RESISTER		ASSAILANT ASSAULT		ASSAILANT BATTERY		ASSAILANT DEADLY FORCE						
			DID NOT FOLLOW VERBAL DIRECTION <input type="checkbox"/> STIFFENED (DEAD WEIGHT) <input type="checkbox"/> OTHER _____		FLED <input type="checkbox"/> PULLED AWAY <input type="checkbox"/> OTHER _____		IMMINENT THREAT OF BATTERY <input type="checkbox"/> OTHER _____		ATTACK WITH WEAPON <input type="checkbox"/> ATTACK WITHOUT WEAPON <input type="checkbox"/> OTHER _____		USES FORCE LIKELY TO CAUSE DEATH OR GREAT BODILY HARM <input type="checkbox"/> WEAPON <input type="checkbox"/> OTHER _____								
MEMBER'S RESPONSE			MEMBER PRESENCE <input type="checkbox"/> VERBAL COMMANDS <input type="checkbox"/> ESCORT HOLDS <input type="checkbox"/> WRISTLOCK <input type="checkbox"/> ARMBAR <input type="checkbox"/> PRESSURE SENSITIVE AREAS <input type="checkbox"/> CONTROL INSTRUMENT <input type="checkbox"/> OC/CHEMICAL WEAPON W/AUTHORIZATION <input type="checkbox"/> OTHER _____		OPEN HAND STRIKE <input type="checkbox"/> TAKE DOWN / EMERGENCY HANDCUFFING <input type="checkbox"/> OC CHEMICAL WEAPON <input type="checkbox"/> CANINE <input type="checkbox"/> TASER (Probe Discharge) <input type="checkbox"/> TASER (Contact Stun) <input type="checkbox"/> TASER (Laser Targeted) <input type="checkbox"/> TASER (Spark Displayed) <input type="checkbox"/> OTHER _____		ELBOW STRIKE <input type="checkbox"/> CLOSED HAND STRIKE/PUNCH <input type="checkbox"/> IMPACT WEAPON (Describe in Box 40) <input type="checkbox"/> OTHER _____		KNEE STRIKE <input type="checkbox"/> KICKS <input type="checkbox"/> IMPACT MUNITION (Describe in Box 40) <input type="checkbox"/>		FIREARM <input type="checkbox"/> OTHER _____								
WEAPON DISCHARGE INCIDENT	39 <input type="checkbox"/> DNA				* OC/CHEMICAL WEAPON AUTHORIZED BY (NAME)				40 ADDITIONAL INFORMATION <b>R/O'S WHILE IN PURSUIT OF A U UW OFFENDER, R/O DISCHARGED /FIRED AT A DOG LOCATED AT [REDACTED] DOG WAS NOT STRUCK AND THE FIRED ROUND WENT INTO THE GROUND. R/O RECOVERED (1) SPENT CASING AND NO STRUCTURAL DAMAGE OBSERVED</b>										
	POSITION		STAR NO		UNIT														
	41 WEAPON TYPE <input type="checkbox"/> 01 REVOLVER <input type="checkbox"/> 02 RIFLE <input type="checkbox"/> 03 SHOTGUN		<input checked="" type="checkbox"/> 04 SEMI-AUTO PISTOL <input type="checkbox"/> 05 CHEMICAL WEAPON <input type="checkbox"/> 06 TASER (Probe Discharge) <input type="checkbox"/> 07 OTHER		42 INCIDENT OCCURRED <input type="checkbox"/> Indoors <input checked="" type="checkbox"/> Outdoors		43 LIGHTING CONDITIONS <input checked="" type="checkbox"/> 02 Night <input type="checkbox"/> 03 Dawn <input type="checkbox"/> 04 Dusk <input type="checkbox"/> 05 Poor Artificial <input type="checkbox"/> 06 Good Artificial		44 WEATHER CONDITIONS <b>CLEAR</b>										
	45 MAKE/MANUFACTURER <b>GLOCK, INC --AU--</b>		46 MODEL <b>21</b>		47 BARREL LENGTH <b>4.6</b>		48 CALIBER/GAUGE <b>45 CAL</b>												
49 TASER DART ID NO		50 WEAPON SERIAL No (Include Letters)		51 CHICAGO GUN REG NO		52 IL FIREARM OWNER ID NO		53 HANDGUN CERTIFICATE NO											
54 SPECIAL WEAPON CERTIFICATE NO		55 PROPERTY INVENTORY NO		56 TYPE OF AMMUNITION USED <b>Department Issued</b>		57 NO OF WEAPONS DISCHARGED BY THIS MEMBER <b>1</b>		58 TOTAL NO OF SHOTS MEMBER FIRED <b>1</b>											
59 WHO FIRED FIRST SHOT <input checked="" type="checkbox"/> 01 MEMBER <input type="checkbox"/> 02 OFFENDER <input type="checkbox"/> 03 OTHER (SPECIFY)		60 WAS FIREARM RELOADED DURING INCIDENT <input type="checkbox"/> 01 YES <input checked="" type="checkbox"/> 02 NO		61 NO OF CATDRIDGES/ SHOT SHELLS RELOADED <b>0</b>		62 HOW WAS MEMBER'S HANDGUN WORN <input checked="" type="checkbox"/> 01 RT SIDE (WAIST) <input type="checkbox"/> 02 LT SIDE (WAIST) <input type="checkbox"/> 03 OTHER (Specify)													
63 HOW WAS MEMBER'S HANDGUN DRAWN <input checked="" type="checkbox"/> 01 STRONG SIDE DRAW <input type="checkbox"/> 02 CROSS DRAW <input type="checkbox"/> 03 OTHER (Specify)		64 SPECIFY METHOD/EQUIPMENT USED TO RELOAD		65 DID MEMBER USE SIGHTS <input checked="" type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO															
66 DESCRIBE PROTECTIVE COVER USED (LIGHT POLES, DOORWAYS, CAR, FURNITURE, ETC) <b>DNA</b>				67 DISTANCE BETWEEN INVOLVED MEMBER & OFFENDER WHEN FIRST SHOT WAS FIRED <input checked="" type="checkbox"/> 01 0 - 05 FT <input type="checkbox"/> 02 05 - 10 FT <input type="checkbox"/> 03 10 - 15 FT <input type="checkbox"/> 04 OVER 15 FT															
68 PERSON/OBJECT STRUCK AS RESULT OF THE DISCHARGE OF MEMBERS WEAPON <input type="checkbox"/> 01 PERSON <input checked="" type="checkbox"/> 02 OBJECT <input type="checkbox"/> 03 BOTH <input type="checkbox"/> 04 UNKNOWN				69 POSITION OF MEMBER DISCHARGING WEAPON <input checked="" type="checkbox"/> 01 STANDING <input type="checkbox"/> 02 LYING DOWN <input type="checkbox"/> 03 SITTING <input type="checkbox"/> 04 KNEELING <input type="checkbox"/> 05 OTHER (SPECIFY)															
CASE INFO.	72 NOTIFICATIONS (OC OR TASER INCIDENT) <input type="checkbox"/> OEMC <input checked="" type="checkbox"/> DESK SGT & W C /DIST OF OCCUR NOTIFICATIONS (FIREARM INCIDENT) <input checked="" type="checkbox"/> OEMC <input checked="" type="checkbox"/> DESK SGT & W C /DIST OF OCCUR <input checked="" type="checkbox"/> OP COMMAND <input checked="" type="checkbox"/> DET DIV Members will ensure that all required notifications and all witnesses to this use of force are documented in the appropriate case report																		
SIGNATURES	73 REPORTING MEMBER (Print Name) <b>MATA, RICARDO</b>				STAR/EMPLOYEE NO <b>11563</b>				SIGNATURE [REDACTED]										
	23-DEC-2011 00:37:19																		
Reviewing supervisor will ensure the legibility and completeness of this report and attest by entering the required information below																			
74 REVIEWING SUPERVISOR (Print Name) <b>HERNANDEZ, IGNACIO</b>				STAR NO <b>1308</b>				SIGNATURE [REDACTED]				DATE REVIEWED <b>23-DEC-2011 00:38:49</b>				TIME			



## WATCH COMMANDER/OCIC REVIEW

THE WATCH COMMANDER WILL COMPLETE THE REVIEW SECTION FOR 1 ) ALL INCIDENTS THAT DID NOT INVOLVE THE DISCHARGE OF A FIREARM, 2 ) FIREARM DISCHARGE INCIDENTS INVOLVING THE DESTRUCTION OF AN ANIMAL OR, 3 ) ACCIDENTAL DISCHARGE OF A FIREARM NOT RESULTING IN AN INJURY TO ANY PERSON

THE ADS WILL COMPLETE THE REVIEW SECTION FOR ALL INCIDENTS INVOLVING, 1 ) THE DISCHARGE OF A FIREARM OR IMPACT MUNITIONS BY OR AT A DEPARTMENT MEMBER EXCEPT FOR AN ANIMAL DESTRUCTION OR AN ACCIDENTAL DISCHARGE THAT DOES NOT RESULT IN AN INJURY TO ANY PERSON, 2 ) MEMBER'S USE OF FORCE BY WHATEVER MEANS THAT RESULTS IN THE DEATH OF A PERSON, 3 ) ANY LESSER USE OF FORCE BY A DEPARTMENT MEMBER WHEN THAT USE OF FORCE STEMS FROM THE SAME INCIDENT DESCRIBED HERE IN 1 OR 2

75 SUBJECT'S STATEMENT REGARDING THE USE OF FORCE

☒ DNA

☐ REFUSED

☐ UNABLE TO INTERVIEW (Specify Reason)

Based on all available information it appears that this officer fired a single shot when he was in fear of great bodily harm from an attacking dog

76 WATCH COMMANDER/OCIC RATIONALE FOR BOX 77 FINDING

Based on all available information it appears that this officer fired a single shot when he was in fear of great bodily harm from an attacking dog The use of deadly force in this matter would be within Department guidelines and the law C R Log Number obtained as a matter of procedure Sgt Pettis #1184 of I A D in 010 to further the investigation

77 WATCH COMMANDER/OCIC FINDING BASED UPON CURRENTLY AVAILABLE INFORMATION

☒ I HAVE CONCLUDED THAT THE MEMBER'S ACTIONS WERE IN COMPLIANCE WITH DEPARTMENT PROCEDURES AND DIRECTIVES

☐ I HAVE CONCLUDED THAT FURTHER INVESTIGATION IS REQUIRED

LOG NO /CRNO 1050859 OBTAINED

78 WATCH COMMANDER/OCIC (Print Name)

COZZO, SAM P

SIGNATURE

DATE COMPLETED TIME

23-DEC-2011 00:52:46

79 DISTRIBUTION OF ORIGINAL TRR

A TRR PACKET, INCLUDING THE TRR AND COPIES OF THE BELOW LISTED ATTACHMENTS WILL BE FORWARDED TO THE OFFICE OF PROFESSIONAL STANDARDS

ATTACHMENTS - PHOTOCOPIES OF

☐ SUPPLEMENTARY REPORT

☐ I O D REPORT

80 TOTAL TRR's THIS EVENT No

☐ CASE REPORT

☐ OFFICER BATTERY REPORT

☐ CR INITIATION REPORT

1

☐ ARREST REPORT

☐ TO-FROM-SUBJECT REPORTS FROM DEPARTMENT WITNESS(ES)



## ARREST REPORT

3510 S. Michigan Avenue, Chicago, Illinois 60653

(For use by Chicago Police Department Personnel Only)

CPD-11.420C (REV. 6/30)

CB #:

IR #:

YD #:

RD #:

EVENT #:

## ARREST REPORTING

OFFENDER	Name: [REDACTED]	Res: [REDACTED]	Beat: 1135	Male	Black	5' 07"	160 lbs	Brown Eyes	Black Hair	Short Hair Style	Dark Complexion
	DOB: [REDACTED]	AGE: 48 years	POB: Illinois	ARMED WITH Handgun							
INCIDENT	Arrest Date: 22 December 2011 22:50	TRR Completed? No	Total No Arrested: 2	Co-Arrests	Assoc Cases						
	Location: [REDACTED]	Beat: 1021	Dependent Children? No	DCFS Ward ? No							
CHARGES	1	Offense As Cited	720 ILCS 5.0/24-1.1-A		Victim						
			UUW - WEAPON - FELON, POSSESS/USE FIREARM		State Of Illinois, P.O. Olivares #14358						
	2	Offense As Cited	430 ILCS 65.0/2-A-2		State Of Illinois, P.O. Olivares #14358						
			POSS AMMUNITION - W/O VALID FOID								
FELONY REVIEW											
		Felony Review : Approved	23 DEC 2011 19:37	Logan, G	State's Attorneys's Office						
RECOVERED NARCOTICS	NO NARCOTICS RECOVERED										



## ARREST REPORTING

WARRANT

NO WARRANT IDENTIFIED

NON-OFFENDER(S)

## VICTIM AND COMPLAINANT

Name: STATE OF ILLINOIS, P.O. Olivares #14358

Injured? No Deceased? No

DOB:

Hospitalized? No

Age:

Treated and Released? No

Comments:

ARRESTEE  
VEHICLE

Vehicle: VEHICLE IMPOUNDED: Yes

2004 Automobile - Pontiac - Grand Am - Hardtop, 4-Door

VIN#:

Lic#:

IL

Color: Aluminum Or Silver (Top) / Aluminum Or Silver (Bottom)

Inv#:

Pound#:

Disposition: Streets And Sanitation #099411

PROPERTIES

## Confiscated Properties :

All confiscated properties are recorded in the e-Track System. This system can be queried by the inventory number to retrieve all official court documents related to evidence and/or recovered properties.

PROPERTIES INFORMATION FOR [REDACTED] NOT AVAILABLE IN THE AUTOMATED ARREST SYSTEM.

INCIDENT NARRATIVE

(The facts for probable cause to arrest AND to substantiate the charges include, but are not limited to, the following)

EVENT# [REDACTED] IN SUMMARY, THIS IS AN ON-VIEW ARREST BY 010 DISTRICT TACT (1063) TEAM. WHILE CONDUCTING AN INVESTIGATION OF A POSSIBLE ROBBERY SUSPECTS, A/O'S OBSERVED THE ABOVE WHO FIT THE DESCRIPTION (two male blacks in a silver grand am), AT WHICH TIME A/O'S APPROACHED AND THE ABOVE and the co-arrestee LOOKED IN THEIR DIRECTION AND FLED. DURING THE PURSUIT THE ABOVE WAS OBSERVED FALLING DOWN TO THE GROUND AT WHICH POINT (1) BLUE STEEL SEMI-AUTOMATIC HANDGUN LOADED W/ (6) LIVE ROUNDS (FIRESTAR INTERARMS .40 CAL 3" BARREL SER# [REDACTED]) FELL OUT OF SUBJECT'S WAISTBAND (WITNESSED BY P.O. OLIVARES #14358 AND immediately controlled and RECOVERED BY P.O. KORWIN #19122 INV# [REDACTED]). ABOVE SUBJECT CONTINUED TO FLEE AND AFTER A BRIEF FOOT PURSUIT WAS PLACED INTO CUSTODY AT [REDACTED] MIRANDIZED AND TRANSPORTED TO 10TH DISTRICT PROCESSING. ABOVE WAS RE-MIRANDIZED PER F.O.P. CARD AT 0032HRS IN 10TH DISTRICT PROCESSESING ROOM BY P.O. VEGA AND WITNESSED BY OLIVARES, ARRESTEE MADE THE FOLLOWING STATEMENT IN ESSENCE AND NOT VER BATIM, " I BOUGHT THE 38, THE SILVER ONE AT 16TH AND PULASKI, I GAVE IT TO MY BOY EARLIER TONIGHT FOR PROTECTION". NAME CHECK CLEAR/NEGATIVE INVESTIGATIVE ALERTS. ABOVE ARRESTEE IS A CONVICTED FELON UNDER CASE # [REDACTED] AND A SELF ADMITTED MEMBER OF THE [REDACTED]

Property inventory # [REDACTED] (1) BLUE STEEL SEMI-AUTOMATIC HANDGUN LOADED W/ (6) LIVE ROUNDS (FIRESTAR INTERARMS .40 CAL 3" BARREL SER# [REDACTED])

SEE WC COMMENTS SECTION FOR ADDITIONAL COMMENTS



## ARREST REPORTING

COURT INFO	BOND INFO		
Desired Court Date: 29 December 2011 Branch: 44-4 3150 W FLOURNOY - Room Court Sgt Handle? No Initial Court Date: 24 December 2011 Branch: 1 2600 S CALIFORNIA - Room111 Docket #:		BOND INFORMATION NOT AVAILABLE	
<b>ATTESTING OFFICER:</b> I hereby declare and affirm, under penalty of perjury, that the facts stated herein are accurate to the best of my knowledge, information and/or belief.			
Attesting Officer: #14358 OLIVARES, L F [REDACTED]		23 DEC 2011 03 53	
<b>ARRESTING OFFICER(S):</b>			
1st Arresting Officer: #14358 OLIVARES, L F [REDACTED]		Beat 1063A	
2nd Arresting Officer: #19204 MC KENNA, C L [REDACTED]		1063A	
<b>APPROVING SUPERVISOR:</b>			
Approval of Probable Cause : #179 COZZO, S [REDACTED]		23 DEC 2011 03 57	



## ARREST PROCESSING REPORT

Holding Facility: District 010 Lockup  
Received in Lockup: 23 December 2011 04 03  
Prints Taken: 23 December 2011 04 07  
Palprints Taken: Yes  
Photograph Taken: 23 December 2011 04 05  
Released from Lockup:

Time Last Fed: 23 December 2011 11 33  
Time Called: Phone#:  
Cell #: 11  
Transport Details : 2PO 1043 22-DEC-2011 23 17

## VISUAL CHECK OF ARRESTEE

## ARRESTEE QUESTIONNAIRE

Is there obvious pain or injury? No  
Is there obvious signs of infection? No  
Under the influence of alcohol/drugs? No  
Signs of alcohol/drug withdrawal? No  
Appears to be despondent? No  
Appears to be irrational? No  
Carrying medication? No

Presently taking medication? No  
(if female)are you pregnant?  
First time ever been arrested? No  
Attempted suicide/serious harm? No  
Serious medical or mental problems? No  
Are you receiving treatment? No

## RETURN TO HOLDING FACILITY COMMENTS:

## QUESTIONNAIRE REMARKS:

## LOCKUP KEEPER COMMENTS:

23 DEC 2011 11:33 4385 CAMACHO, Carmelo Arrestee Fed  
23 DEC 2011 14:00 12059 GALLOWAY, Allen J Cell 11  
23 DEC 2011 19:12 12059 GALLOWAY, Allen J Refused Food 19,10 Hrs

## EMERGENCY CONTACT

Name : REFUSED

Res:

Beat:

NO INTERVIEWS LOGGED

NO VISITORS LOGGED



## ARREST PROCESSING REPORT

MOVEMENT LOG

MOVEMENT LOG INFORMATION NOT AVAILABLE

WC COMMENTS

## Watch Commander Comments:

#179 Cozzo, Sam P [REDACTED]

23 DEC 2011 04 03

Hold Requested by Area 4 Det Div W C Ed Wodnicki #1105 to review appropriate charges

REL w/o CHARGING

DOES NOT APPLY TO THIS ARREST

## ARRESTEE PROCESSING PERSONNEL:

PROCESSING PERSONNEL

			Beat
Searched By:	#15286	MULCHRONE, J C	
Lockup Keeper:	#4727	LIBERTY, K C	
Assisting Arresting Officer:	#11563	MATA, R	1063A
Assisting Arresting Officer:	#17571	MANDILE, A	1063B
Assisting Arresting Officer:	#17763	SERRATO JR,	1063D
Assisting Arresting Officer:	#19122	KORWIN, W M	1063C
Assisting Arresting Officer:	#19328	COX, B M	1063E
Assisting Arresting Officer:	#6875	VEGA, G	1063D
Assisting Arresting Officer:	#8048	ELIZONDO, G	1063B
Assisting Arresting Officer:	#9721	DEEREN, K C	1063E
Fingerprinted By:	#4727	LIBERTY, K C	

## APPROVAL PERSONNEL:

Beat

Final Approval of Charges : #515 HLAVATY, D L [REDACTED] 23 DEC 2011 19 49



# TACTICAL RESPONSE REPORT/Chicago Police Department

<b>MEMBER INVOLVED</b>	1 DATE OF INCIDENT <b>22-DEC-2011</b>		TIME <b>22:50:00</b>		2 ADDRESS OF OCCURRENCE <b>[REDACTED]</b>			3 LOCATION CODE <b>291</b>		4 BEAT/OCCUR <b>1021</b>					
	5 POSITION <b>9161</b>		6 LAST NAME <b>MATA</b>		7 FIRST NAME <b>RICARDO</b>		8 STAR NO <b>11563</b>		9 SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F		10 RACE CODE <b>S</b>				
	11 AGE <b>[REDACTED]</b>		12 HT <b>511</b>		13 WT <b>170</b>										
<b>SUBJECT INFORMATION</b>	14 DATE OF APPT <b>05-JUN-1995</b>		15 EMPLOYEE NO <b>[REDACTED]</b>		16 UNIT & BEAT OF ASSIGNMENT <b>010 1063A</b>		17 DUTY STATUS <input checked="" type="checkbox"/> 01 On <input type="checkbox"/> 02 Off		18 MEMBER INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		19 MEMBER IN UNIFORM? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No				
	20 LAST NAME <b>[REDACTED]</b>		21 FIRST NAME <b>[REDACTED]</b>		22 M I <b>[REDACTED]</b>		23 SEX <input type="checkbox"/> 01 M <input type="checkbox"/> 02 F		24 RACE <b>[REDACTED]</b>		25 D O B <b>[REDACTED]</b>				
	26 HT <b>[REDACTED]</b>		27 WT <b>[REDACTED]</b>												
	28 ADDRESS <b>[REDACTED]</b>		29 TELEPHONE NO <b>[REDACTED]</b>		30 WAS SUBJECT ARMED? <input type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No		31 SUBJECT INJURED? <input type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No		32 SUBJECT ALLEGED INJURY? <input type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No						
	33 WHERE WAS MEDICAL TREATMENT OBTAINED? <b>[REDACTED]</b>		34 BY WHOM? <b>[REDACTED]</b>		35 CONDITION <input type="checkbox"/> 01 Apparently Normal <input type="checkbox"/> 02 Under Influence <input type="checkbox"/> 03 Hospitalized <input type="checkbox"/> 04 Not Hospitalized <input type="checkbox"/> 05 Refused Medical Aid										
<b>REASON FOR USE OF FORCE</b> (Check all that apply)	36 CHARGES PLACED <input checked="" type="checkbox"/> DNA														
	37 CB NO <b>[REDACTED]</b> IR NO <b>[REDACTED]</b> <input checked="" type="checkbox"/> DNA														
<b>SUBJECT'S ACTIONS</b>	PASSIVE RESISTER			ACTIVE RESISTER			ASSAILANT ASSAULT			ASSAILANT BATTERY			ASSAILANT DEADLY FORCE		
	DID NOT FOLLOW VERBAL DIRECTION <input type="checkbox"/>			FLED <input type="checkbox"/>			IMMINENT THREAT OF BATTERY <input type="checkbox"/>			ATTACK WITH WEAPON <input type="checkbox"/>			USES FORCE LIKELY TO CAUSE DEATH OR GREAT BODILY HARM <input type="checkbox"/>		
<b>MEMBER'S RESPONSE</b>	STIFFENED (DEAD WEIGHT) <input type="checkbox"/>			PULLED AWAY <input type="checkbox"/>			OTHER _____			ATTACK WITHOUT WEAPON <input type="checkbox"/>			WEAPON <input type="checkbox"/>		
	OTHER _____			OTHER _____			OTHER _____			OTHER _____			OTHER _____		
<b>WEAPON DISCHARGE INCIDENT</b>	MEMBER PRESENCE <input type="checkbox"/>			OPEN HAND STRIKE <input type="checkbox"/>			ELBOW STRIKE <input type="checkbox"/>			KNEE STRIKE <input type="checkbox"/>			FIREARM <input type="checkbox"/>		
	VERBAL COMMANDS <input type="checkbox"/>			TAKE DOWN / EMERGENCY HANDCUFFING <input type="checkbox"/>			CLOSED HAND STRIKE/PUNCH <input type="checkbox"/>			KICKS <input type="checkbox"/>			OTHER _____		
<b>CASE INFO.</b>	ESCORT HOLDS <input type="checkbox"/>			OC CHEMICAL WEAPON <input type="checkbox"/>			IMPACT WEAPON (Describe in Box 40) <input type="checkbox"/>			IMPACT MUNITION (Describe in Box 40) <input type="checkbox"/>					
	WRISTLOCK <input type="checkbox"/>			CANINE <input type="checkbox"/>			OTHER _____								
<b>SIGNATURES</b>	ARMBAR <input type="checkbox"/>			TASER (Probe Discharge) <input type="checkbox"/>											
	PRESSURE SENSITIVE AREAS <input type="checkbox"/>			TASER (Contact Stun) <input type="checkbox"/>											
<b>WEAPON DISCHARGE INCIDENT</b>	CONTROL INSTRUMENT <input type="checkbox"/>			TASER (Laser Targeted) <input type="checkbox"/>											
	OC/CHEMICAL WEAPON W/AUTHORIZATION <input type="checkbox"/>			TASER (Spark Displayed) <input type="checkbox"/>											
<b>CASE INFO.</b>	OTHER _____			OTHER _____											
<b>SIGNATURES</b>	39 * OC/CHEMICAL WEAPON AUTHORIZED BY (NAME) <b>[REDACTED]</b>														
	40 ADDITIONAL INFORMATION <b>R/O'S WHILE IN PURSUIT OF A U UW OFFENDER, R/O DISCHARGED /FIRED AT A DOG LOCATED AT 1310 S. CHRISTIANA. DOG WAS NOT STRUCK AND THE FIRED ROUND WENT INTO THE GROUND. R/O RECOVERED (1) SPENT CASING AND NO STRUCTURAL DAMAGE OBSERVED</b>														
<b>WEAPON DISCHARGE INCIDENT</b>	POSITION <b>[REDACTED]</b>			STAR NO <b>[REDACTED]</b>			UNIT <b>[REDACTED]</b>								
	41 WEAPON TYPE <input type="checkbox"/> 01 REVOLVER <input type="checkbox"/> 02 RIFLE <input type="checkbox"/> 03 SHOTGUN			44 SEMI-AUTO PISTOL <input checked="" type="checkbox"/> 05 CHEMICAL WEAPON <input type="checkbox"/> 06 TASER (Probe Discharge) <input type="checkbox"/> 07 OTHER <input type="checkbox"/>			42 INCIDENT OCCURRED <input type="checkbox"/> Indoors <input checked="" type="checkbox"/> Outdoors			43 LIGHTING CONDITIONS <input checked="" type="checkbox"/> 02 Night <input type="checkbox"/> 03 Dawn <input type="checkbox"/> 04 Dusk <input type="checkbox"/> 05 Poor Artificial <input type="checkbox"/> 06 Good Artificial			44 WEATHER CONDITIONS <b>CLEAR</b>		
<b>WEAPON DISCHARGE INCIDENT</b>	45 MAKE/MANUFACTURER <b>GLOCK, INC --AU--</b>			46 MODEL <b>21</b>			47 BARREL LENGTH <b>4.6</b>			48 CALIBER/GAUGE <b>45 CAL</b>					
	49 TASER DART ID NO <b>[REDACTED]</b>			50 WEAPON SERIAL No (Include Letters) <b>[REDACTED]</b>			51 CHICAGO GUN REG NO <b>[REDACTED]</b>			52 IL FIREARM OWNER ID NO <b>[REDACTED]</b>			53 HANDGUN CERTIFICATE NO <b>[REDACTED]</b>		
<b>WEAPON DISCHARGE INCIDENT</b>	54 SPECIAL WEAPON CERTIFICATE NO <b>[REDACTED]</b>			55 PROPERTY INVENTORY NO <b>[REDACTED]</b>			56 TYPE OF AMMUNITION USED <b>Department Issued</b>			57 NO OF WEAPONS DISCHARGED BY THIS MEMBER <b>1</b>			58 TOTAL NO OF SHOTS MEMBER FIRED <b>1</b>		
	59 WHO FIRED FIRST SHOT <input checked="" type="checkbox"/> 01 MEMBER <input type="checkbox"/> 02 OFFENDER <input type="checkbox"/> 03 OTHER (SPECIFY) _____			60 WAS FIREARM RELOADED DURING INCIDENT <input type="checkbox"/> 01 YES <input checked="" type="checkbox"/> 02 NO			61 NO OF CATDRIDGES/ SHOT SHELLS RELOADED <b>0</b>			62 HOW WAS MEMBER'S HANDGUN WORN <input checked="" type="checkbox"/> 01 RT SIDE (WAIST) <input type="checkbox"/> 02 LT SIDE (WAIST) <input type="checkbox"/> 03 OTHER (Specify) _____					
<b>WEAPON DISCHARGE INCIDENT</b>	63 HOW WAS MEMBER'S HANDGUN DRAWN <input checked="" type="checkbox"/> 01 STRONG SIDE DRAW <input type="checkbox"/> 02 CROSS DRAW <input type="checkbox"/> 03 OTHER (Specify) _____			64 SPECIFY METHOD/EQUIPMENT USED TO RELOAD <b>[REDACTED]</b>			65 DID MEMBER USE SIGHTS <input checked="" type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO								
	66 DESCRIBE PROTECTIVE COVER USED (LIGHT POLES, DOORWAYS, CAR, FURNITURE, ETC) <b>DNA</b>			67 DISTANCE BETWEEN INVOLVED MEMBER & OFFENDER WHEN FIRST SHOT WAS FIRED <input checked="" type="checkbox"/> 01 0 - 05 FT <input type="checkbox"/> 02 05 - 10 FT <input type="checkbox"/> 03 10 - 15 FT <input type="checkbox"/> 04 OVER 15 FT											
<b>WEAPON DISCHARGE INCIDENT</b>	68 PERSON/OBJECT STRUCK AS RESULT OF THE DISCHARGE OF MEMBERS WEAPON <input type="checkbox"/> 01 PERSON <input checked="" type="checkbox"/> 02 OBJECT <input type="checkbox"/> 03 BOTH <input type="checkbox"/> 04 UNKNOWN			69 POSITION OF MEMBER DISCHARGING WEAPON <input checked="" type="checkbox"/> 01 STANDING <input type="checkbox"/> 02 LYING DOWN <input type="checkbox"/> 03 SITTING <input type="checkbox"/> 04 KNEELING <input type="checkbox"/> 05 OTHER (SPECIFY) _____											
<b>WEAPON DISCHARGE INCIDENT</b>	70 EVENT NO <b>[REDACTED]</b>														
	71 R D NO <b>[REDACTED]</b>														
<b>CASE INFO.</b>	72 NOTIFICATIONS (OC OR TASER INCIDENT) <input type="checkbox"/> OEMC <input checked="" type="checkbox"/> DESK SGT & W C /DIST OF OCCUR														
	NOTIFICATIONS (FIREARM INCIDENT) <input checked="" type="checkbox"/> OEMC <input checked="" type="checkbox"/> DESK SGT & W C /DIST OF OCCUR <input checked="" type="checkbox"/> OP COMMAND <input checked="" type="checkbox"/> DET DIV														
<b>SIGNATURES</b>	Members will ensure that all required notifications and all witnesses to this use of force are documented in the appropriate case report														
<b>SIGNATURES</b>	73 REPORTING MEMBER (Print Name) <b>MATA, RICARDO</b>			STAR/EMPLOYEE NO <b>11563</b>			SIGNATURE <b>[REDACTED]</b>								
	23-DEC-2011 00:37:19			<b>[REDACTED]</b>			<b>[REDACTED]</b>								
<b>SIGNATURES</b>	Reviewing supervisor will ensure the legibility and completeness of this report and attest by entering the required information below														
	74 REVIEWING SUPERVISOR (Print Name) <b>HERNANDEZ, IGNACIO</b>			STAR NO <b>1308</b>			SIGNATURE <b>[REDACTED]</b>			DATE REVIEWED <b>23-DEC-2011 00:38:49</b>			TIME		



## WATCH COMMANDER/OCIC REVIEW

THE WATCH COMMANDER WILL COMPLETE THE REVIEW SECTION FOR 1 ) ALL INCIDENTS THAT DID NOT INVOLVE THE DISCHARGE OF A FIREARM, 2 ) FIREARM DISCHARGE INCIDENTS INVOLVING THE DESTRUCTION OF AN ANIMAL OR, 3 ) ACCIDENTAL DISCHARGE OF A FIREARM NOT RESULTING IN AN INJURY TO ANY PERSON

THE ADS WILL COMPLETE THE REVIEW SECTION FOR ALL INCIDENTS INVOLVING, 1 ) THE DISCHARGE OF A FIREARM OR IMPACT MUNITIONS BY OR AT A DEPARTMENT MEMBER EXCEPT FOR AN ANIMAL DESTRUCTION OR AN ACCIDENTAL DISCHARGE THAT DOES NOT RESULT IN AN INJURY TO ANY PERSON, 2 ) MEMBER'S USE OF FORCE BY WHATEVER MEANS THAT RESULTS IN THE DEATH OF A PERSON, 3 ) ANY LESSER USE OF FORCE BY A DEPARTMENT MEMBER WHEN THAT USE OF FORCE STEMS FROM THE SAME INCIDENT DESCRIBED HERE IN 1 OR 2

75 SUBJECT'S STATEMENT REGARDING THE USE OF FORCE

☒ DNA

☐ REFUSED

☐ UNABLE TO INTERVIEW (Specify Reason)

Based on all available information it appears that this officer fired a single shot when he was in fear of great bodily harm from an attacking dog

76 WATCH COMMANDER/OCIC RATIONALE FOR BOX 77 FINDING

Based on all available information it appears that this officer fired a single shot when he was in fear of great bodily harm from an attacking dog The use of deadly force in this matter would be within Department guidelines and the law C R Log Number obtained as a matter of procedure Sgt Pettis #1184 of I A D in 010 to further the investigation

77 WATCH COMMANDER/OCIC FINDING BASED UPON CURRENTLY AVAILABLE INFORMATION

☒ I HAVE CONCLUDED THAT THE MEMBER'S ACTIONS WERE IN COMPLIANCE WITH DEPARTMENT PROCEDURES AND DIRECTIVES

☐ I HAVE CONCLUDED THAT FURTHER INVESTIGATION IS REQUIRED

LOG NO /CRNO 1050859 OBTAINED

78 WATCH COMMANDER/OCIC (Print Name)

COZZO, SAM P

SIGNATURE

DATE COMPLETED

TIME

23-DEC-2011 00:52:46

79 DISTRIBUTION OF ORIGINAL TRR

A TRR PACKET, INCLUDING THE TRR AND COPIES OF THE BELOW LISTED ATTACHMENTS WILL BE FORWARDED TO THE OFFICE OF PROFESSIONAL STANDARDS

ATTACHMENTS - PHOTOCOPIES OF

☐ SUPPLEMENTARY REPORT

☐ I O D REPORT

80 TOTAL TRR's THIS EVENT No

☐ CASE REPORT

☐ OFFICER BATTERY REPORT

☐ CR INITIATION REPORT

1

☐ ARREST REPORT

☐ TO-FROM-SUBJECT REPORTS FROM DEPARTMENT WITNESS(ES)



**BUREAU OF INTERNAL AFFAIRS**  
**Investigations Division**  
**Special Investigations Section**

**23 December 2011**  
**C.L. 1050859**

**TO:** Juan J. RIVERA  
Chief  
Bureau of Internal Affairs

Robert KLIMAS  
Commander  
Bureau of Internal Affairs

**ATTN:** Lt. Susan CLARK  
Commanding Officer  
Administrative Section / BIA

**CC:** Lt. Fredrick R. Melean  
Commanding Officer  
General Investigations Section / BIA

**FROM:** Sergeant Christopher Pettis  
Investigations Division  
Special Investigations Section / BIA

**SUBJECT:** **Synoptic Report for C.L. # 1050859**  
**(Weapons Discharge /no hits) animal**

**INVOLVED OFFICER:** Police Officer Ricardo Mata,  
Star # 11563, Unit 010 (On Duty)  
Employee # [REDACTED]  
Date of Appointment: 05 June 1995  
D.O.B. [REDACTED]

**DATE/TIME/ LOCATION:** 22 December 2011, 2250 hours, [REDACTED]

**OCIC:** none

**BAC RESULTS:** .0000

**Reference: Log # 1050859**

**RD #**  
**WD #**

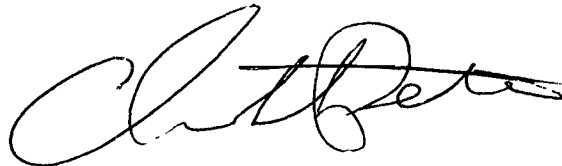


**BUREAU OF INTERNAL AFFAIRS**  
**Investigations Division**  
**Special Investigations Section**

**23 December 2011**  
**C.L. 1050859**

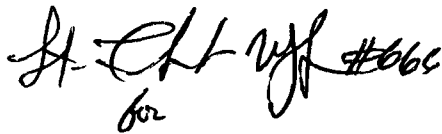
SUMMARY: On 22 December 2011, at 2320 hours, Investigating Sergeant was notified by C.P.I.C. (Gonzalez # 3445) of a weapons discharge incident concerning an on duty police officer in the 010<sup>th</sup> district. (RD # [REDACTED] Event # [REDACTED])

Investigating Sergeant arrived at the 010<sup>th</sup> district at approximately 0030 hours. Investigating Sergeant started the observation period of P.O. Mata at 0045 hours. P.O. Mata supplied a breath test sample at 0109 hours which resulted in a BAC result of .0000. P.O. Mata supplied a urine sample at 0115 hours.



Sergeant Christopher Pettis  
Investigations Division  
Special Investigations Section / BIA

APPROVED:



Lt. Susan CLARK  
Commanding Officer  
Administrative Section / BIA





# NOTICE OF ALCOHOL AND DRUG TESTING FOLLOWING A FIREARMS DISCHARGE INCIDENT

CHICAGO POLICE DEPARTMENT

TO: Involved Member's Name RICARDO MATA Title Police officer  
Star No. 11563 Employee No. [REDACTED] Unit 010

The applicable collective bargaining agreements and policy of the Chicago Police Department require those involved in a firearms discharge incident to undergo testing for the presence of alcohol and drugs. You are hereby ordered to submit to this testing and are required to take an alcohol breath test and provide a urine specimen.

Any refusal to take the required tests or refusal to fully comply with the testing procedures will be treated as a violation of Department Rules and will subject you to discipline up to and including separation.

I have read, understand, and complied with the above.

Print Member's Name <u>RICARDO MATA</u>	Involved Member's Signature <u>[Signature]</u> # <u>11563</u>	Date and Time <u>23 Dec 11 0045</u>
Type of Test: <b>Alcohol</b>	Location: <u>3315 W. Ogden (010)</u>	Date and Time: <u>23 Dec 11 01:09</u>
Type of Test: <b>Drug</b>	Location: <u>3315 W. Ogden (010)</u>	Date and Time: <u>23 Dec 11 0115</u>

I have provided notice to the above-named involved member and conducted the alcohol and drug testing as indicated.

IAD Supervisor's Name <u>Sgt. Christopher Petris</u>	IAD Supervisor's Signature <u>[Signature]</u>	Date and Time <u>23 Dec 11 0120</u>
---	--	--

CPD-44.252 (7/10) DISTRIBUTION ORIGINAL - TO IAD SUPERVISOR, COPY - TO INVOLVED MEMBER



# FORENSIC DRUG TESTING CUSTODY AND CONTROL FORM

Firearms Discharge

SPECIMEN ID NO.

STEP 1: COMPLETED BY EMPLOYER OR EMPLOYER REPRESENTATIVE

LAB ACCESSION NO.

A. Employer Name, Address, I.D. No.

B. MRO Name, Address, Phone and Fax No.

C. Donor SSN or Employee I.D. No.

D. Donor Name: Last:

First:

E. Donor ID Verified:



Photo ID



Emp. Rep.

F. Reason for Test:



Pre-employment (1)



Random (3)



Reasonable Suspicion/Cause (5)



Post-Accident (2)



Promotion (22)



Return to Duty (6)



Follow-up (23)



Other (specify) (99)

mandatory post

G. Drug Tests to be Performed:

Firearms discharge

H. Collection Site Name:

(010) DIST

Collection Site Code:

Address:

3315 W 01den

City, State and Zip:

C 4 6-0

Collector Phone No.:

Collector Fax No.:

## STEP 2: COMPLETED BY COLLECTOR

Read specimen temperature within 4 minutes. Is temperature between 90° and 100° F? ☒ Yes ☐ No, Enter Remark

Specimen Collection:



Split



Single



None Provided (Enter Remark)



Observed (Enter Remark)

REMARKS

STEP 3: Collector affixes bottle seal(s) to bottle(s). Collector dates seal(s). Donor initials seal(s). Donor completes STEP 5.

## STEP 4: CHAIN OF CUSTODY - INITIATED BY COLLECTOR AND COMPLETED BY LABORATORY

I certify that the specimen given to me by the donor identified in the certification section on Copy 2 of this form was collected, labeled, sealed, and released to the Delivery Service noted in accordance with applicable requirements.

☒ Signature of Collector  
Time of Collection  
0115 AM  
12/23/11  
Date (Mo./Day/Yr.)

### SPECIMEN BOTTLE(S) RELEASED TO:



Quest Diagnostics Courier



FedEx

Other

Name of Delivery Service Transferring Specimen to Lab

RECEIVED

AT LAB: ☒

Signature of Accessioner

(Print) Accessioner's Name (First, MI, Last)

Date (Mo./Day/Yr.)

Primary Specimen  
Bottle Seal Intact



Yes



No, Enter Remark

### SPECIMEN BOTTLE(S) RELEASED TO:

## STEP 5: COMPLETED BY DONOR

I certify that I provided my specimen to the collector; that I have not adulterated it in any manner; each specimen bottle used was sealed with a tamper-evident seal in my presence; and that the information and numbers provided on this form and on the label affixed to each specimen bottle is correct

☒ Signature of Donor  
Date (Mo./Day/Yr.)  
Daytime Phone No.  
Evening Phone No.

(PRINT) Donor's Name (First, MI, Last)

Date (Mo./Day/Yr.)

Date of Birth

Mo. Day Yr.

## STEP 6: COMPLETED BY MEDICAL REVIEW OFFICER - PRIMARY SPECIMEN

In accordance with applicable requirements, my determination/verification is:



NEGATIVE



POSITIVE



TEST CANCELLED



REFUSAL TO TEST BECAUSE:



DILUTE



ADULTERATED



SUBSTITUTED

REMARKS

☒

Signature of Medical Review Officer

(PRINT) Medical Review Officer's Name (First, MI, Last)

Date (Mo./Day/Yr.)

## STEP 7: COMPLETED BY MEDICAL REVIEW OFFICER - SECONDARY SPECIMEN

In accordance with applicable requirements, my determination/verification for the split specimen (if tested) is:



RECONFIRMED



FAILED TO RECONFIRM - REASON

☒

Signature of Medical Review Officer

(PRINT) Medical Review Officer's Name (First, MI, Last)

Date (Mo./Day/Yr.)



ORENSIC DRUG TESTING CUSTODY AND CONTROL FORM

Turnip Abuse

SPECIMEN ID NO.

STEP 1: COMPLETED BY COLLECTOR OR EMPLOYER REPRESENTATIVE

LAB ACCESSION NO.

A. Employer Name, Address, I.D. No.

B. MRO Name, Address, Phone and Fax No.

C. Donor SSN or Employee I.D. No.

D. Donor Name:

Last:

First:

E. Donor ID Verified:

☒ Photo ID

☐ Emp. Rep.

F. Reason for Test:

☐ Pre-employment (1)

☐ Random (3)

☐ Reasonable Suspicion/Cause (5)

☐ Post-Accident (2)

☐ Promotion (22)

☐ Return to Duty (6)

☐ Follow-up (23)

☒ Other (specify) (99)

Turnip Abuse

G. Drug Tests to be Performed:

Turnip Abuse

H. Collection Site Name:

Collection Site Code:

Address:

Collector Phone No.:

City, State and Zip:

Collector Fax No.:

STEP 2: COMPLETED BY COLLECTOR

Read specimen temperature within 4 minutes. Is temperature between 90° and 100° F? ☒ Yes ☐ No, Enter Remark

Specimen Collection:

☐ Split

☒ Single

☐ None Provided (Enter Remark)

☒ Observed (Enter Remark)

REMARKS

STEP 3: Collector affixes bottle seal(s) to bottle(s). Collector dates seal(s). Donor initials seal(s). Donor completes STEP 5.

STEP 4: CHAIN OF CUSTODY - INITIATED BY COLLECTOR AND COMPLETED BY LABORATORY

I certify that the specimen given to me by the donor identified in the certification section on Copy 2 of this form was collected, labeled, sealed, and released to the Delivery Service noted in accordance with applicable requirements

☒ Signature of Collector  
Sgt Christopher Petrus  
(Print) Collector's Name (First, MI, Last)

0115 AM  
12/23/11  
Time of Collection  
Date (Mo./Day/Yr)

SPECIMEN BOTTLE(S) RELEASED TO:

☒ Quest Diagnostics Courier ☐ FedEx

☐ Other

Name of Delivery Service Transferring Specimen to Lab

RECEIVED  
AT LAB: ☒

Signature of Accessioner

(Print) Accessioner's Name (First, MI, Last)

Date (Mo./Day/Yr)

Primary Specimen  
Bottle Seal Intact

☐ Yes

☐ No, Enter Remark

SPECIMEN BOTTLE(S) RELEASED TO:

STEP 5: COMPLETED BY DONOR

I certify that I provided my specimen to the collector, that I have not adulterated it in any manner, each specimen bottle used was sealed with a tamper-evident seal in my presence; and that the information and numbers provided on this form and on the label affixed to each specimen bottle is correct

☒

Signature of Donor

(PRINT) Donor's Name (First, MI, Last)

Date (Mo./Day/Yr)

Daytime Phone No.

Evening Phone No.

Date of Birth

Mo. Day Yr



# DRUG TEST SPECIMEN AFFIDAVIT

CHICAGO POLICE DEPARTMENT

**INSTRUCTIONS:** Prepare in duplicate. Original (White) to Collection Unit; copy (Yellow) to member.

Donor I.D. verified

☒ Photo I. D. by

☐ Employer Representative

Sgt. Christopher Pettis

Signature of Employer Representative

**PART I -** A. On the 23 day of December, 2011 at 0115, I, Ricardo MATA  
(TIME) (PRINT NAME)  
removed the foil-top seal from a cup, and then removed the contents from the cup, I urinated into this  
same cup, then I delivered this cup containing my urine specimen to Sgt. Christopher Pettis,  
and witnessed this member: (PRINT RECEIVING STAFF MEMBER'S NAME)

B. Break the Tamper Evident Plastic Filament Link  
between the cap and the base of the vial.

C. Pour a portion of my urine specimen into a vial  
with the control number printed on it's side.

D. Close the vial cap.

E. Seal the vial with a piece of evidence tape which was placed across the cap and down both sides of the vial.  
I then initialed the evidence tape with specimen ID number

F. Place my specimen in a bag which was closed with self adhesive tape. Then I initialed the barcode  
label on bag with the number

A	B
MAIN TEST VIAL - NO.	ALTERNATE TEST VIAL - NO.

EXAMINEE'S SIGNATURE

STAR/EMP NO.

WITNESS'S SIGNATURE

STAR/EMP NO.

RECEIVING STAFF MEMBER'S SIGNATURE

STAR/EMP NO.

SUPERVISOR'S SIGNATURE

STAR/EMP NO.

**PART II -** The urine specimen with the control number was received and then secured in the  
appropriate Random Drug Testing Unit refrigerator/freezer compartment by:

Sgt. J. Landers, on 23 DEC 11, at 1459  
(STAFF MEMBER'S SIGNATURE) (DATE) (TIME) (EXAMINEE'S INITIALS)

**PART III -** I attest that the sealed urine specimen bag containing specimen ID number  
was removed from the Random Drug Testing Unit refrigerator by  
and then delivered to  
(LAB MEMBER) (DATE) (TIME)

Specimen received by  
(LAB MEMBER'S INITIALS) (RDTU MEMBER'S SIGNATURE) STAR/EMP NO.



RANDOM DRUG TESTING UNIT

ALTERNATE COLLECTION RECEIPT

On the 23<sup>rd</sup> day of DECEMBER 2011, I Sgt T. SANDERS # 1271  
received a collected urine specimen from Sgt. C. PETTIS # 1184. The specimen  
was delivered in sealed /unsealed condition and was received in packaging described as:

Select One ☒ A clear and blue CPD evidence/property bag containing two tape-sealed vials (including  
one within a sealed Quest Diagnostics specimen bag).

or

☐

The packaging was then opened by Sgt. T. SANDERS #1271 in the presence  
of Sgt. C. PETTIS #1184. The following items were removed from the container:

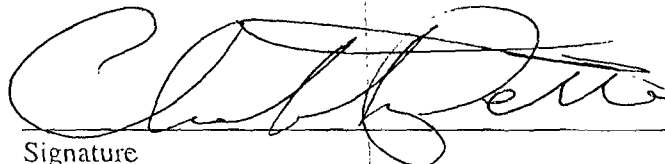
Select One ☒ One tape-sealed vial labeled # [REDACTED] within a sealed Quest  
Diagnostics specimen bag and one tape-sealed vial labeled # [REDACTED]

or

☐

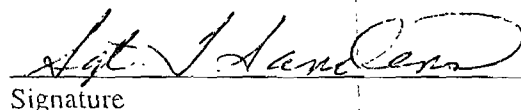
The specimen vials were then placed in the Random Drug Testing Unit collection site refrigerator/freezer  
by Sgt. T. SANDERS #1271, as witnessed by Sgt. C. PETTIS #1184.

Specimen delivered by:

  
Signature

# 1184

Received/stored by:

  
Signature

# 1271







Last Name: MATA

First Name: RICARDO

Rank: P.O.

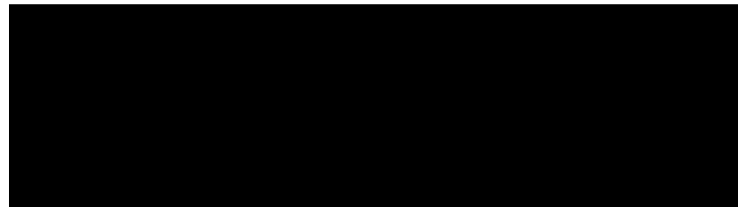
Star #: 11563

Unit: 010

Home Zip Code: \_\_\_\_\_

Date Hired: 05 June 1995

Birthdate: \_\_\_\_\_



23 DEC 11



# DRUG TEST SPECIMEN AFFIDAVIT

CHICAGO POLICE DEPARTMENT

**INSTRUCTIONS:** Prepare in duplicate. Original (White) to Collection Unit; copy (Yellow) to member.

Donor I.D. verified

☒ Photo I. D. by SGT. Christopher Pettis

☐ Employer Representative

Signature of Employer Representative

**PART I -** A. On the 23 day of December, 2011 at 0115, Ricardo MATA  
(TIME) (PRINT NAME)

removed the foil-top seal from a cup, and then removed the contents from the cup, I urinated into this same cup, then I delivered this cup containing my urine specimen to SGT. Christopher Pettis, and witnessed this member:  
(PRINT RECEIVING STAFF MEMBER'S NAME)

B. Break the Tamper Evident Plastic Filament Link between the cap and the base of the vial.

C. Pour a portion of my urine specimen into a vial with the control number printed on it's side.

D. Close the vial cap.

E. Seal the vial with a piece of evidence tape which was placed across the cap and down both sides of the vial. I then initialed the evidence tape with specimen ID number

F. Place my specimen in a bag which was closed with self adhesive tape. Then I initialed the barcode label on bag with the number

EXAMINEE'S SIGNATURE

STAR/EMP NO.

WITNESS'S SIGNATURE

STAR/EMP NO.

RECEIVING STAFF MEMBER'S SIGNATURE

STAR/EMP NO.

SUPERVISOR'S SIGNATURE

STAR/EMP NO.

**PART II -** The urine specimen with the control number was received and then secured in the appropriate Random Drug Testing Unit refrigerator/freezer compartment by:

Sgt. J. Landona, on 23 DEC 11, at 1459  
(STAFF MEMBER'S SIGNATURE) (DATE) (TIME) (EXAMINEE'S INITIALS)

**PART III -** I attest that the sealed urine specimen bag containing specimen ID number was removed from the Random Drug Testing Unit refrigerator by and then delivered to  
(LAB MEMBER) (DATE) (TIME) (RDTU MEMBER)

Specimen received by  
(LAB MEMBER'S INITIALS) (RDTU MEMBER'S SIGNATURE) STAR/EMP NO.



Firearms Discharge

STEP 1: COMPLETED BY COLLECTOR OR EMPLOYER REPRESENTATIVE

LAB ACCESSION NO.

A. Employer Name, Address, I.D. No.

B. MRO Name, Address, Phone and Fax No.

C. Donor SSN or Employee I.D. No.

D. Donor Name:

Last:

First:

E. Donor ID Verified:



Photo ID



Emp. Rep.

F. Reason for Test:



Pre-employment (1)



Random (3)



Reasonable Suspicion/Cause (5)



Post-Accident (2)



Promotion (22)

☐ Return to Duty (6)

☐ Follow-up (23)



Other (specify) (99)

Mandatory Post

G. Drug Tests to be Performed:

Firearms discharge

H. Collection Site Name:

(010) DIS-1

Collection Site Code:

Address: 3315 W. Oiden

City, State and Zip: CHS-0

Collector Phone No.:

Collector Fax No.:

STEP 2: COMPLETED BY COLLECTOR

Read specimen temperature within 4 minutes. Is temperature between 90° and 100° F? ☒ Yes ☐ No, Enter Remark

Specimen Collection:



Split



Single



None Provided (Enter Remark)



Observed (Enter Remark)

REMARKS

STEP 3: Collector affixes bottle seal(s) to bottle(s). Collector dates seal(s). Donor initials seal(s). Donor completes STEP 5.

STEP 4: CHAIN OF CUSTODY - INITIATED BY COLLECTOR AND COMPLETED BY LABORATORY

I certify that the specimen given to me by the donor identified in the certification section on Copy 2 of this form was collected, labeled, sealed, and released to the Delivery Service noted in accordance with applicable requirements

☒ Signature of Collector  
CHRISTOPHER PERKINS  
(Print) Collector's Name (First, MI, Last)

0115 AM  
12/23/11  
Time of Collection  
Date (Mo./Day/Yr.)

SPECIMEN BOTTLE(S) RELEASED TO:

☒ Quest Diagnostics Courier ☐ FedEx

☐ Other

Name of Delivery Service Transferring Specimen to Lab

RECEIVED  
AT LAB: ☒

Signature of Accessioner

(Print) Accessioner's Name (First, MI, Last)

Date (Mo./Day/Yr.)

Primary Specimen  
Bottle Seal Intact

☐ Yes

☐ No, Enter Remark

SPECIMEN BOTTLE(S) RELEASED TO:

STEP 5: COMPLETED BY DONOR

I certify that I provided my specimen to the collector, that I have not adulterated it in any manner, each specimen bottle used was sealed with a tamper-evident seal in my presence, and that the information and numbers provided on this form and on the label affixed to each specimen bottle is correct

☒ Signature of Donor  
Daytime Phone No.

(PRINT) Donor's Name (First, MI, Last)

Date (Mo./Day/Yr.)

Evening Phone No.

Date of Birth

Mo Day Yr

STEP 6: COMPLETED BY MEDICAL REVIEW OFFICER - PRIMARY SPECIMEN

In accordance with applicable requirements, my determination/verification is:

☐ NEGATIVE

☐ POSITIVE

☐ TEST CANCELLED

☐ REFUSAL TO TEST BECAUSE:

☐ DILUTE

☐ ADULTERATED

☐ SUBSTITUTED

REMARKS

☒

Signature of Medical Review Officer

(PRINT) Medical Review Officer's Name (First, MI, Last)

Date (Mo./Day/Yr.)

STEP 7: COMPLETED BY MEDICAL REVIEW OFFICER - SECONDARY SPECIMEN

In accordance with applicable requirements, my determination/verification for the split specimen (if tested) is:

☐ RECONFIRMED

☐ FAILED TO RECONFIRM - REASON

☒

Signature of Medical Review Officer

(PRINT) Medical Review Officer's Name (First, MI, Last)

Date (Mo./Day/Yr.)





# NOTICE OF ALCOHOL AND DRUG TESTING FOLLOWING A FIREARMS DISCHARGE INCIDENT

CHICAGO POLICE DEPARTMENT

TO: Involved Member's Name RICARDO MATA Title Police officer  
Star No. 11563 Employee No. [REDACTED] Unit 010

The applicable collective bargaining agreements and policy of the Chicago Police Department require those involved in a firearms discharge incident to undergo testing for the presence of alcohol and drugs. You are hereby ordered to submit to this testing and are required to take an alcohol breath test and provide a urine specimen.

Any refusal to take the required tests or refusal to fully comply with the testing procedures will be treated as a violation of Department Rules and will subject you to discipline up to and including separation.

I have read, understand, and complied with the above

Print Member's Name <u>RICARDO MATA</u>	Involved Member's Signature <u>[Signature]</u> # <u>11563</u>	Date and Time <u>23 Dec 11 0045</u>
Type of Test: <u>Alcohol</u>	Location: <u>3315 W. Ogden (010)</u>	Date and Time <u>23 Dec 11 01:09</u>
Type of Test: <u>Drug</u>	Location: <u>3315 W. Ogden (010)</u>	Date and Time <u>23 Dec 11 0115</u>

I have provided notice to the above-named involved member and conducted the alcohol and drug testing as indicated

IAD Supervisor's Name <u>Sgt. Christopher Pettis</u>	IAD Supervisor's Signature <u>[Signature]</u>	Date and Time <u>23 Dec 11 0120</u>
---	--	--

CPD-44.252 (7/10)

DISTRIBUTION ORIGINAL - TO IAD SUPERVISOR, COPY - TO INVOLVED MEMBER



40005057 AREA/ROUTE/STOP: XXXXXXX  
CHICAGO POLICE DEPT  
RANDOM DRUG UNIT #1027SW  
3510 S MICHIGAN AVE  
CHICAGO, IL 60653

## LABORATORY REPORT



Quest  
Diagnostics

PARTICIPANT NAME	PARTICIPANT ID	ROOM NO	AGE	SEX	PHYSICIAN
PAGE REQUESTION NO	ACCESSION NO	LAB REF #	COLLECTION DATE & TIME	LOG-IN-DATE	FAX DATE & TIME
1			12232011 01:15AM	12282011	12282011 03:00PM

REMARKS Client Site Location:

REASON FOR TEST: MAND POST FIREARMS DISCHARGE  
DONOR ID VERIFIED: PHOTO I.D.

REPORT STATUS	FINAL	TEST	RESULT		UNITS	REFERENCE RANGE	SITE CODE
			IN RANGE	OUT OF RANGE			
REPORT FOR:		CHICAGO POLICE DEPT - 40005057 RANDOM DRUG UNIT, #1027SW 3510 S MICHIGAN AVE CHICAGO, IL 60653					
Tests Ordered:		35190N (SAP 10-50/2000 W/NIT)					
Integrity Checks		Acceptable Range					
CREATININE		170.1 mg/dL				>= 20 mg/dL	
pH		5.3				4.5-8.9	
OXIDIZING ADULTERANTS		Negative					
Substance Abuse Panel					Initial Test Level	MS Confirm Test Level	
AMPHETAMINES		Negative			1000 ng/mL	500 ng/mL	
BARBITURATES		Negative			300 ng/mL	200 ng/mL	
BENZODIAZEPINES		Negative			300 ng/mL	200 ng/mL	
COCAINE METABOLITES		Negative			300 ng/mL	150 ng/mL	
MARIJUANA METABOLITES		Negative			50 ng/mL	15 ng/mL	
METHADONE		Negative			300 ng/mL	200 ng/mL	
METHAQUALONE		Negative			300 ng/mL	200 ng/mL	
OPIATES		Negative			2000 ng/mL	2000 ng/mL	
PHENCYCLIDINE		Negative			25 ng/mL	25 ng/mL	
PROPOXYPHENE		Negative			300 ng/mL	200 ng/mL	
CERTIFYING SCIENTIST: KSBK01							
SPECIMEN RECEIVED AND PROCESSED IN THE LENEXA DHHS CERTIFIED LABORATORY.							
LAB	Quest Diagnostics-Lenexa 10101 Renner Blvd Lenexa KS 66219						
		>> END OF REPORT <<					



TEST RECORD  
RBT IV

RBT IV# [REDACTED]  
DATE 12-23-11  
TEST NO. 0090  
ID#

29691  
AS IV# [REDACTED]  
TEMPERATURE 20 C

SUBJECT TEST  
%BAC TIME  
-----

.000 BLANK  
.000 AUTO 01:09  
-----

SUBJECT  
[REDACTED]

OPERATOR

Sgt. C. P. 's  
WIT

01  
TF